

**DEPARTMENT
PHILOSOPHY****FIP, RAPC**

The Family Independence Program (FIP) and Refugee Assistance Program Cash (RAPC) are temporary cash assistance to support a family's movement to self-sufficiency. The recipients of FIP and RAPC engage in employment and self-sufficiency related activities so they can become self-supporting.

**DEPARTMENT
POLICY****FIP, RAP Cash**

Federal and state laws require each work eligible individual (WEI) in the FIP and RAPC group to participate in the work participation program or other employment-related activity unless temporarily deferred or engaged in activities that meet participation requirements. These clients must participate in employment and/or self-sufficiency related activities to increase their employability and obtain employment. Apply FIP policy to RAPC cash clients. The work participation program is administered by the Workforce Development Agency, State of Michigan (WDASOM) through the Michigan one-stop service centers. The work participation program serves employers and job seekers for employers to have skilled workers and job seekers to obtain jobs that provide economic self-sufficiency. The work participation program case managers use the One-Stop Management Information System also known as the OSMIS to record the clients' assigned activities and participation. In this item the OSMIS is referred to as the Management Information System (MIS).

WEIs not referred to the work participation program will participate in other activities to overcome barriers so they may eventually be referred to the work participation program or other employment service provider. DHS must monitor these activities and record the client's participation in the Family Self-Sufficiency Plan (FSSP).

A WEI who refuses, without good cause, to participate in assigned employment and/or other self-sufficiency related activities is subject to penalties. For more about penalties, refer to:

- BEM 233A - FIP-related penalties.
- BEM 233C - RAP Cash penalties.

See BEM 230B and BEM 233B for FAP employment requirements.

**INFORMING
CLIENTS**

The DHS-1171, Assistance Application Information Booklet, provides each applicant with information about the work requirements. The same information about work requirements is provided in the MI Bridges online application. Review information found in the information booklet, or direct the client to review his/her Mi Bridges online application and

the DHS-1538, Work and Self-Sufficiency Rules, with clients at application, redetermination and when a change in circumstances might affect the person's required hours of participation. Review all of the following information:

- Work requirements and reasons why a person may be deferred from work participation.
- Rights and responsibilities.
- Self-sufficiency requirements.
- Penalties for non-compliance, good cause, the triage and hearing processes and good cause.
- Right of deferred persons to participate.
- Reporting requirements, including income verification and the DHS-630, Weekly Activity Log, in this item.
- FIP time limit restrictions.
- Prohibited use of FIP to purchase lottery tickets, alcohol or tobacco. It is also prohibited for gambling, illegal activities, massage parlors, spas, tattoo shops, bail-bond agencies, adult entertainment, cruise ships or other nonessential items.

REASONABLE ACCOMMODATION

Disability Definition

Section 504 of the American Disability Act (ADA) defines a disability as a physical or mental impairment that substantially limits one or more major life activities; or a history of such an impairment; or being regarded as having such an impairment. Examples of major life activities include: thinking, learning, taking care of oneself, maintaining social relationships, sleeping, communicating, etc.

A number of FIP clients have disabilities or live with a spouse or child(ren) with disabilities that may need accommodations to participate in assigned activities. The needs of persons with disabilities are highly individual and must be considered on a case-by-case basis. DHS must make reasonable efforts to ensure that persons with disability-related needs or limitations will have an effective and meaningful opportunity to benefit from DHS programs and services to the same extent as persons without disabilities. Efforts to accommodate persons with disabilities may include modifications to program requirements, or extra help, as explained below. Failure to recognize and accommodate disabilities undermines efforts to assist families in achieving self-sufficiency.

When a client requests reasonable accommodation in order to participate, DHS and the employment service providers will consider the need for applying the above requirements.

A disability as defined above that requires reasonable accommodation must be verified by an appropriate source, such as a doctor, psychologist, therapist, educator, etc. A client may disclose a disability at any time. Failure to disclose at an earlier time does not prevent the client from claiming a disability or requesting an accommodation in the future.

Screening and Assessment

Be alert to undisclosed or unrecognized disabilities and offer screening and assessment as appropriate. Help clients understand that DHS can only offer accommodations if a disability is verified. Clients are screened for disabilities on the DHS-619, Jobs and Self-Sufficiency Survey and the Family Automated Screening Tool (FAST), which ask questions about medical problems, special education and symptoms of mental illness.

Inform clients requesting accommodation or deferral that they may be required to attend appointments with doctors, psychologists, or others to ensure that appropriate accommodations or deferrals are made. Explain that assessment is voluntary but failure to cooperate with assessment may prevent DHS from providing a deferral or accommodation. Also inform the client of the requirement to engage in self-sufficiency and family strengthening activities even if they are deferred from work participation program or work activities and may be subject to penalties if they do not participate as required.

Accommodation

When information provided by an appropriate source indicates the need for reasonable accommodation, do the following:

- Obtain a DHS-54A, Medical Needs or the DHS 54E, Medical Needs -Work Participation Program, form from a qualified medical professional listed on the form.
- Consult Michigan Rehabilitation Services (MRS) if additional information about appropriate accommodations is needed or when you need advice.
- Document the accommodation in the *Other MWA referral comments* section of the *Employment Services - Details* screen, and on the Family Self-Sufficiency Plan (FSSP).

Modifications or extra help may include, but are not limited to, the following:

- Reduced hours of required participation.
- Extended education allowances including more than 12 months allowed for vocational education.

- Extended job search/job readiness time limit.

Justification for a plan including reasonable accommodation is documented in the client's FSSP and the Individual Service Strategy (ISS with the one-stop service center).

When clients with verified disabilities are fully participating to their capability, they are counted as fully engaged in meeting work participation requirements regardless of the hours in which they are engaged, even if they do not meet federal work requirements.

MANDATORY PARTICIPATION IN EMPLOYMENT SERVICES

All WEIs, unless temporarily deferred, must engage in employment that pays at least state minimum wage or participate in employment services. WEIs who are temporarily deferred are required to participate in activities that will help them overcome barriers and prepare them for employment or referral to an employment service provider.

The Work Participation Program

Most WEIs are referred to the work participation program provided by the one-stop service center serving the client's area when one of the following exists:

- A WEI applies for FIP/RAP.
- A WEI applies to be a member added to a FIP/RAP group.
- A WEI is no longer temporarily deferred from employment services.

Note: An 18 year old **adult** group member is considered a WEI and must attend the work participation program, regardless of school attendance.

The last date for a client to make contact with the work participation program is 20 calendar days from the date work participation program referral and the DHS 4785, Work Participation Program Notice, are sent. If the client calls to reschedule before the 20th day, extend the *Last Date for Client Contact* on MIS. Either DHS or the one-stop service center have the capability of extending this date.

Note: A task and reminder is sent to the worker when a participant did not appear at the work participation program within the 20-day period. A pending application is automatically denied.

DHS workers indicate the minimum number of hours a client must participate in employment and/or self-sufficiency-related activities on the Employment Services Details screen in Bridges. Clients may have limitations that support the need for special accommodations, which may include a reduction in the number of hours they are able to participate.

In this instance, refer to policy outlined above under [Reasonable Accommodations](#).

The one-stop service centers use the minimum required hours indicated in the FSSP to initially assign clients to activities that meet federal minimum participation requirements, up to 40 hours per week, unless reasonable accommodation policy applies and is documented.

Other Service Providers

The following groups must be referred to other service providers (not the work participation program) when applicable:

Refugee Contractors

Refugee contractors serve refugees defined in BEM 630. Refer refugees to the refugee contractor that serves your county.

Tribal Agencies

Tribal agencies serve some clients under the Native Employment Works Program. Refer those who may be served by a tribal agency.

Teen parent Contractor

Teen parent service providers serve parents in counties that have contracts to provide special assistance to parents under age 20; see Exhibit I at the end of this item for a list of providers. Providers offer the following:

- Assessments of minor parents' living arrangements.
- Assistance in finding appropriate living situations.
- Skills in independent living, parenting and self-support.
- Evaluations of how well the child's needs are met.

A recipient is eligible for teen parent contractor services if:

- Under age 20.
- Pregnant or parenting.
- Medicaid eligible.

Contact the provider for any additional information required to make a referral.

Special Needs Participants

Determine appropriate participation and types of supports for the following groups considering Reasonable Accommodations earlier in the item. Reasonable accommodations are selected from the verification for the deferral reason on the Employment Services Details screen in Bridges.

Minor Parent

A minor parent is a parent under age 18 who is not emancipated and is either the parent of a dependent child living with him/her or is pregnant; see BEM 201. A minor parent, aged 16 or 17, who has graduated from high school must participate in the work participation program or other service provider. See BEM 245 for the definition of high school.

Clients In Treatment Plans

Certain clients have particular circumstances which may make their participation in employment and/or self-sufficiency related activities problematic. Unless otherwise deferred, they must be referred to the work participation program. Indicate the appropriate Additional Information from the drop down list on the *Employment Services-Details* screen in Bridges.

Examples of these circumstances include:

- Prescribed medication to control mental illness.
- Ongoing substance abuse treatment.

Former Recipients

A client whose benefits are terminated continues to be eligible for contracted employment and/or self-sufficiency related activities (for example, counseling) until the contractual obligations have been met or the contract has been terminated, whichever occurs first.

Refugees are eligible for refugee-specific employment services for the first five years they are in the country, regardless of whether they receive assistance from DHS.

**MANDATORY
PARTICIPANTS
DELAYED
REFERRAL
(DEFERRED) TO
EMPLOYMENT
SERVICES**

WEIs meeting one of the following criteria are only temporarily not referred to an employment service provider because they may continue to count in Michigan's federal work participation rate. They are required to participate in activities that will increase their full potential, help them overcome barriers and prepare them for employment or referral to an employment services provider as soon as possible. Enter the specialist assigned activities into the FSSP to track participation of temporarily deferred WEIs; see BEM 228.

If the WEI refuses or fails to provide verification of a deferral when required, refer him/her to the work participation program.

Notify the /work participation program service provider immediately by phone or email when a client who was previously referred is granted a temporary deferral.

Information entered in the data collection will create the following participation/deferral reasons.

**Meeting
Participation
Through Education****Minor Parent
Grantees**

Minor parent grantees who are full-time high school students are regarded as fully engaged in required activities even though his/her education does not meet the federal requirements. Enter the education activity on the FSSP under the Goal and Activities tab, Non-Core Activities, High School Completion/GED. Enter 30 hours per week of actual participation upon receipt of verification the student is attending.

**Working 40 Hours
Per Week**

Applicants and members added to the cash assistance group who are working a minimum of 40 hours per week at the state minimum wage are not referred to the work participation program. This client's participation in employment is meeting requirements.

**Care of a Child or
Post-Partum
Recovery**

Disregard one parent of a child under the age of two months up to two months when the newborn is in the home. Disregard a mother for post-partum recovery up to two months after giving birth when the newborn is not in the home (for example, removed by Children's Protective Services (CPS), adoption).

Lack of Child Care

In the Employment Services - Detail screen in Bridges, select the No child care for child under six deferral reason and reply to questions regarding child care when a single parent who personally provides care for a child under age six in the FIP EDG and adequate child care is unavailable. Adequate child care meets all of the following:

- Appropriate. The care is appropriate to the child's age, disabilities and other conditions.
- Reasonable distance. The total commuting time to and from work and child care facilities does not exceed three hours per day.
- Suitable provider. The provider meets applicable state and local standards. Unlicensed providers who are not registered/licensed by the DHS Bureau of Children and Adult Licensing must meet DHS enrollment requirements.
- Affordable. The child care is provided at the rate of payment or reimbursement offered by DHS.

Clients who need assistance in finding a licensed or registered provider should be referred to Great Start Connect. The online Web-based early learning resource site can be accessed at www.greatstartforkids.com. All active licensed and registered providers are searchable. If additional assistance is needed, clients can be referred to 1-877-614-7328, to search the Great Start Regional Child Care Resource Center serving their county. Resource centers can provide personal consultation for

families in need of child care. If a provider cannot be located, the client needs to provide verification.

If a provider is located within 10 calendar days, end the deferral on the Employment Services Detail screen in Bridges. Bridges will generate a referral to the work participation program as well as generate the DHS-4785 once the specialist runs and certifies eligibility.

If the client is unable to obtain child care that meets the conditions above within 10 calendar days, the client may be deferred from referral to the work participation program for 90 days or until the child turns age six, or until appropriate care is available, whichever is sooner. Bridges will change the deferral code to mandatory participant at the end of the deferral period. Once the specialist runs and certifies eligibility, Bridges will generate the referral to the work participation program and the DHS-4785 will be generated. Document the referrals and results in the case record. The participation is identified as *No Child Care Available*.

Pregnancy Complications

Clients requesting a deferral from the work participation program due to pregnancy complications must provide verification that indicates that they are unable to participate.

Domestic Violence

Domestic violence means one or more threats or acts against any family member concerning any of the following:

- Physical injury.
- Sexual abuse.
- Sexual involvement of a dependent child.
- Mental/emotional abuse.
- Neglect or deprivation of medical care.

Defer parents and caretakers with a documented claim of threatened or actual domestic violence, against themselves or their dependent children, that can reasonably be expected to interfere with work requirements.

Assist the client to develop a plan intended to overcome domestic violence as a barrier to self-sufficiency. The plan may include participation in services for domestic violence victims or receipt of related professional care. Specific activities which might reasonably be expected to endanger the client should be avoided. Document the clients' agreement in the FSSP.

The maximum deferral period is three months. Bridges will change the deferral code to mandatory participant at the end of the deferral period. Bridges generates a referral to the work participation program as well as the DHS-4785 once the specialist runs and certifies eligibility.

With documented supervisor approval, extensions are permitted in three month increments.

Use the client's statement as documentation unless there is sufficient reason to question it. If the statement is questionable, request further documentation, including any of the following:

- Service from a domestic violence provider.
- Medical records.
- Court records, such as personal protection order or petition.
- Police records (for example, domestic disturbance response).
- School records (for example, statement by a school counselor).
- Statement by a licensed therapist or counselor.
- Other case record information (including children's services).

Note: All information concerning domestic violence is confidential; see BAM 310, Confidentiality and Public Access to Case Records.

VISTA, Job Corps, AmeriCorps

Participant in VISTA, Job Corps or AmeriCorps meet participation requirements if the client is participating in this activity for at least the minimum number of required hours. These clients are not referred to the work participation program unless they wish to participate in the one-stop service center education and training program.

- When a participant in VISTA, Job Corps or AmeriCorps participates less than the minimum number of required hours, refer the client to the work participation program as a mandatory participant.

Use case notes to inform the work participation program of the client's participation in VISTA, Job Corps or AmeriCorps.

EFIP Group Members

Extended FIP (EFIP) recipients may continue receiving retention services provided by the work participation program, at the discretion of the work participation program, when they are mandatory participants. Retention services include direct support services that are necessary for the client to maintain employment. The EFIP client is identified as closed due to earnings on MIS but continues to receive retention services from the work participation program.

Encourage EFIP clients to continue in the work participation program. However, they may refuse the work participation program services. The EFIP client is not in noncompliance in this case and DHS specialist is required to obtain acceptable income verification, record the client's actual participation on the FSSP and provide support services.

Other Member

The following are identified with the deferral/participation code of Other Member and are not referred to the work participation program:

- Members added to an existing EFIP group.

- Members of the EFIP group who are no longer deferred.
- Members of the EFIP group at the one-stop service center who opt out of the work participation program.

Disability

Information recorded in Bridges will defer the following:

- Recipients of RSDI based on disability or blindness.
- Persons found eligible for RSDI based on disability or blindness who are in non-pay status.

FSSP Data Entry

Assign clients to self-sufficiency or barrier removal activities as medically permissible. Enter these activities on the FSSP in the Other activity category listed under the Goals and Activities tab.

Short-Term Incapacity

Persons with a mental or physical illness, limitation, or incapacity expected to last less than three months and which prevents participation may be deferred for up to three months.

Verify the short-term incapacity and the length of the incapacity using a DHS-54A, Medical Needs, or DHS-54E, Medical Needs - Work Participation Program, or other written statement from an M.D./D.O. Set the medical review date accordingly, but not to exceed three months.

Do not advise clients with a short-term incapacity to apply for SSI.

Long-Term Incapacity

At intake, redetermination or anytime during an ongoing benefit period, when an individual claims to be disabled or indicates an inability to participate in work or the work participation program for more than 90 days because of a mental or physical condition, the client should be deferred in Bridges. Conditions include medical problems such as mental or physical injury, illness, impairment or learning disabilities. This may include those who have applied for RSDI/SSI.

Determination of a long term disability is a two step process. The client must fully cooperate with both steps.

Step One: Establishment of Disability

Once a client claims a disability he/she must provide DHS with verification of the disability when requested. The verification must indicate that the disability will last longer than 90 calendar days. If the verification is not returned, a disability is not established. The client will be required to fully participate in the work participation program as a mandatory participant. See Verification Sources later in this item.

Step Two: Defining the Disability

For verified disabilities over 90 days, the specialist must obtain an MRT decision by completing the medical packet. The client must provide DHS with the required documentation such as the DHS-49 series, med-

ical and/or educational documentation needed to define the disability. If the client does not provide the requested verifications, the case should be placed into closure for failure to provide needed documentation; see BAM 815, Medical Determination and Obtaining Medical Evidence.

Note: Deferral/participation reason in Bridges is *Incapacitated more than 90 days* while awaiting verification. Potentially disabled individuals are not sent to the work participation program while waiting for the verification of disability.

A person with a condition or impairment that is pregnancy-related must be deferred for a problem pregnancy. These individuals should not be referred to the Medical Review Team (MRT) or to an SSI Advocate if the **only** conditions or impairments are due to pregnancy; see Pregnancy Complications in this item.

When a person claims he/she is visually impaired, require the person to provide verification from an ophthalmologist or optometrist; a DHS-49-I, Eye Examination Report, may be used; see Visual Impairment in this item.

Individuals with visual impairments should be referred to the Michigan Commission for the Blind (MCB), which offers vocational rehabilitation services.

Verification Returned

When the medical documents indicate a disability will last 90 days or less; see Short Term Incapacity in this item.

When the medical documents indicates the disability will last longer than 90 days:

- Deferral/participation reason in Bridges remains *Incapacitated more than 90 days*.
- Request a utilization report (UT) from the program office; see Requesting a Utilization Report in this item.
- Have the person sign a DHS-1555-E, Release of Information.
- On the DHS-49-A, Medical-Social Eligibility Certification, under program, check the work participation program.
- Complete the DHS-49-A-E, Medical Assessment For Work Participation Program, and attach to the top of the medical packet.
- Obtain a medical determination from the Medical Review Team; see BAM 815, Medical Determination and Obtaining Medical Evidence.

Note: Some conditions may be verified by other test results or evaluations, such as school, therapist, or other professional records.

- Manually set a reminder in Bridges for a three-month follow up.

MRT DECISION

Take action below that pertains to the decision rendered by the Medical Review Team.

All decisions:

Review the decision and information provided by Medical Review Team to determine what accommodations the client needs to participate in the work participation program. The person must pursue employment and/or self sufficiency-related activities. Follow the procedure for accommodating disabilities; see Reasonable **Accommodation** in this item.

Disabled- Potentially Eligible for RSDI/SSI

Verify the client's status with the Social Security Administration (SSA).

- Deferral/participation reason remains *Incapacitated more than 90 days*.
- The individual **must** apply for Retirement Survivors Disability Insurance/Supplemental Security Income (RSDI/SSI) if he/she has not already. Make a referral to the SSA using the DHS-1552, Verification of Application or Appeal For SSI/RSDI, form.

Note: When there is an application pending with the SSA the specialist must monitor the RSDI/SSI claim by entering a Disability Review Date in three month intervals on the Disability Determination-MRT screen in Bridges.

Work Ready With Limitations

Do not require the person to apply for RSDI/SSI.

End the Disability Details record in Bridges. Bridges generates a referral to the work participation program as well as the DHS-4785 once the specialist runs and certifies eligibility.

Note: Identify the client's limitations using additional information and the case notes section in Bridges on the Employment Services screen when the referral is made.

Work Ready

End the Disability Details record in Bridges. Bridges generates a referral to the work participation program as well as the DHS-4785 once the specialist runs and certifies eligibility.

Individuals served by the Department of Human Services

DHS must serve individuals who are determined work ready or work ready with limitations by the Medical Review Team when the individual cannot be served by the work participation program. These clients have a mandatory participation status in Bridges. Assign self-sufficiency activities up to the medically permissible limit of the individual.

Ask the work participation program to provide any test results or other documentation about the client's limitations at the time the client is referred back to DHS.

When to Request a New MRT Decision

When a Medical Review Team decision has been completed and the client states they have additional medical evidence or a new condition, gather new verification and send for an updated MRT decision.

The specialist must assign and maintain FSSP activities to ensure continued pursuit of self-sufficiency while gathering verification or assisting clients with obtaining medical verification or testing. If testing assistance is necessary; see BEM 232, Medical Exams, Immunizations and Tests, for instructions.

When an individual presents a doctor's note after the MRT decision but does not have new medical evidence or a new condition, send the DHS-518 to the doctor and request supporting medical evidence.

If new medical evidence is not provided, do not send the case back to the Medical Review Team. The previous MRT decision stands.

Requesting a Utilization Report (UT)

Each time a individual uses his/her Medicaid card the service is listed on a UT report. These reports have proven to be a valuable tool to DHS when creating a medical packet for the MRT. Each report contains 12 months of medical history, including medications and the name and address of each medical provider.

Note: When developing a medical packet, the specialist should request all medical documentation from each provider on this report. It is not necessary to request documentation from labs or x-rays as they are usually included in the doctor's documentation.

When requesting a UT report, provide the following information:

- Individual name.
- Recipient ID number.
- Case number.
- Name of FIS/ES and phone number.
- County, district and worker number.

The request can be made by email to Policy-Utilization-Report@michigan.gov or fax a request to 517-335-7771.

NONCOMPLIANCE

When a client is determined by MRT to be work ready with limitations becomes noncompliant with the work participation program or his/her FSSP assigned activities, follow instructions outlined in BEM 233A.

Voluntary Participants

Clients who meet the criteria for a deferral and are participating in non-work participation program activities or those requesting a referral to the work participation program may volunteer for the work participation pro-

gram. Deferred clients should be encouraged to participate. If the client is volunteering for the work participation program, generate a work participation program referral and the DHS-4785 by indicating on *Employment Services Detail* screen in Bridges the client is requesting voluntary participation with the work participation program.

Noncompliance penalties apply to all voluntary participants when the client is noncompliant with activities agreed to on the FSSP or assigned by the work participation program. Explain to clients who volunteer that if they try to participate and discover they do not have the capacity to fulfill their requirements, they must immediately inform the specialist or the work participation program worker before becoming noncompliant.

Note: Clients identified as volunteers are eligible to volunteer only as long as the original deferral lasts. When the deferral time limit associated with the voluntary code expires, the specialist should make a new determination based on current case circumstances and update Bridges to reflect the change.

PERSONS NOT REQUIRED TO PARTICIPATE IN EMPLOYMENT SERVICES

WEI

Aged 65 or Older Recipients age 65 and over are not required to participate in employment related activities except for completion of the FAST and FSSP. However, they continue to count in the work rate of participation rate and may be referred to the work participation program as volunteers.

Non-WEI

Non-WEIs are FIP clients who do not count in the state's work participation rate. Required hours are zero. Non-WEIs are not required to participate in work related activities for a minimum number of hours, but must complete a FAST and FSSP. Instead, non-WEIs should engage in other activities to strengthen the family or improve self-sufficiency skills. They include the following:

Disqualified Aliens

A person who is not eligible for cash assistance due to alien status is not a WEI and is not referred to employment services and is not required to engage in the work participation program.

Failure to complete the FAST or FSSP by the due date may result in case closure for failure to provide the department with needed information. BEM 233A and BEM 233C do not apply.

Note: All other disqualified members are WEIs and must be referred to the work participation program unless temporarily deferred.

Ineligible
Caretakers

Ineligible caretakers are not recipients of FIP, although the family is receiving FIP benefits for the children. They are not WEIs and are not referred to the work participation program but must complete a FAST and develop an FSSP for the family to reach self-sufficiency. Failure to complete the FAST or FSSP by the due date may result in case closure for failure to provide the department with needed information. BEM 233A and BEM 233C do not apply.

Care of a
Spouse or
Child with Dis-
abilities

A spouse or parent who provides care for a spouse or child with disabilities living in the home is not a WEI and is not referred to the work participation program if:

- The spouse/child with disabilities lives with the spouse/parent providing care; **and**
- A doctor verifies all of the following in writing or by using a DHS-54A, Medical Needs, form or DHS-54E, Medical Needs -Work Participation Program:
 - The spouse/child with disabilities requires a caretaker due to the extent of the disability.
 - The spouse/parent is needed in the home to provide care.
 - The spouse/parent cannot engage in an employment-related activity due to the extent of care required.

**REQUEST FOR
DELAYED
REFERRAL TO
EMPLOYMENT
SERVICES**

STFS Candidates

FIP applicants who meet eligibility criteria for Short Term Family Support (STFS) and are pending STFS authorization are not referred to the work participation program.

**REQUEST FOR
TEMPORARY
DEFERRAL FROM
THE WORK
PARTICIPATION
PROGRAM**

**Deferral Not
Granted**

Do all of the following when a request for deferral is not granted:

- Document the basis of the decision including any limitations or restrictions in the FSSP under the **Barriers and Referrals** tab.

- Advise and schedule an appointment with **the work participation program**.
- Refer the client to the work participation program, providing information on any limitations to full participation using additional information and case notes when sending the referral.

Advise the client of his/her right to:

- Discuss the deferral decision with a supervisor.
- File as grievance with the one-stop service center if he/she disagree with the activities assigned at the work participation program.
- File a hearing regarding denial of support services such as transportation assistance, child care assistance, decrease in benefits.

Note: When a deferral is not granted, it is not a loss of benefits, termination or negative action. When a client requests a hearing based on not being granted a deferral, be sure to advise the client at the pre-hearing conference and use the DHS-3050, Hearing Summary, to inform the administrative law judge the action did not result in a loss of benefits or services. Be sure the client understands that the right time to file a hearing is once he/she receives a notice of negative action for noncompliance.

Deferral Granted

When a request for deferral is granted:

- Enter the supporting information in Bridges.
- Determine the length of the deferral.
- Notify the client of the decision and length of deferral. **Bridges nightly interface file will notify MIS of the deferral.**
- Document the decision in the FSSP under the **Barriers and Referrals** tab.

An alert is sent to the worker for follow-up to review the deferral four calendar days before the end of the month before it is to expire.

TIME LIMITS

Time limits apply to Job Search/Job Readiness and Vocational Educational activities. Excused absences and holiday hours may only be applied when they occur in the course of participation in unpaid work activities. Enter actual hours on the FSSP as noted below. Use caution when entering any of these hours as the time limits apply even if the client does not meet participation requirements for a given month. Do not enter excused absence hours or Job Search/Job Readiness hours if the client's FSSP planned hours will not meet federal participation require-

ments. Hours entered that do not meet participation requirements are applied to the limits.

Job Search/Job Readiness (JS/JR)

The limit for each WEI assigned to JS/JR is a week of federally required hours times 12 weeks. No more than four consecutive weeks are allowed without a one-week break (Sunday through Saturday) in a preceding 12-month period beginning September 28, 2008 or it is not countable.

Example: Client has a 30 hour requirement and is assigned to JS/JR. The JS/JR limit for this client is 360 hours. Client is assigned to JS/JR for 30 hours each week for six consecutive weeks and completes the assignment each week and actual hours are entered on the FSSP. The 360 hour limit is now reduced to 210 hours (360-180+30). Weeks one through four are countable for the 30 hours each week; week five is not countable and the FSSP will automatically store this week under **other work activity** and not reduce the 30 hours of participation for that week; week six is countable and reduces the total allowable hours. This client cannot get the 150 hours added back to his/her JS/JR limit until the corresponding report months drop off 12 months in the future.

Vocational Educational Training (Voc Ed)

This activity continues to have a lifetime limit of 12 months. The limit for Voc Ed began January 1, 1997. Clients who participated any day in a given month since the limit began will have a count of 1 applied on the FSSP. Participation in this activity exceeding the 12 month limitation is not counted in the work participation rate.

HOLIDAYS AND EXCUSED ABSENCES

Holiday hours and excused absence hours may be applied for unpaid work activities only. The FSSP will not allow entry of these hours for paid work activities. Clients in paid work receive holiday and excused hours from their employer.

Holidays

Holidays are now considered participation when a client in an unpaid work activity has previously been assigned to a planned activity and is scheduled to participate. The following holidays are allowed:

- New Years day.
- Martin Luther King, Jr. day.
- Memorial day.
- Fourth of July.
- Labor day.
- Veterans day.
- Thanksgiving.
- Day after Thanksgiving.
- Christmas Eve.
- Christmas day.

The countable holiday hours are limited to an average of eight hours per holiday.

Record the hours that a client is scheduled to participate in the activity under that activity in the FSSP when:

- Participation is monitored by DHS.
- The client was scheduled to participate.
- The date is one in the list of holidays.
- The hours are required to meet the federally required minimum hours.

Excused Absences

A client's participation in an unpaid work activity may be interrupted by occasional illness or unavoidable event. A WEI's absence may be excused up to 16 hours in a month but no more than 80 hours in a 12-month period.

Record the hours that a client is scheduled to participate in the activity under that activity in the FSSP when:

- Participation is monitored by DHS.
- The client was scheduled to participate.
- The hours are required to meet the federally required minimum hours.

FSSP ENTRY

DHS must record the activities the client will participate in and the client's actual participation in activities monitored by DHS directly in the FSSP. Activities may address barriers to employment services or core activities that count in the work participation rate.

The work participation program workers record the activities the client will participate in and the client's actual participation in activities monitored by the work participation program in MIS. The records in MIS are displayed on the FSSP the next day.

Michigan's rate of FIP/RAPC client's participation in required activities is captured from the records displayed in the FSSP.

**VERIFICATION
REQUIREMENTS****Paid Work
Activities**

The client's actual hours of participation in paid work activities must be verified. The specialist may use two consecutive pay check stubs or wage statements that reflect the average number of hours worked by the client. These or a collateral contact with the client's manager or supervisor meet the requirement to project the client's hours for six months. Determine the average number of hours worked per week and document the actual hours on the FSSP.

Example: Amber submits three consecutive check stubs for pay dates of January 5, 12 and 19. One check stub shows 25 hours worked, one check stub shows 30 hours worked and one check stub shows 32 hours worked. The average of the three check stubs is 29 hours per week on average.

Example: Jordan submits two consecutive check stubs for pay dates of January 5 and January 19. The client is paid bi-weekly. One check stub states 60 hours worked and one check stub states 55 hours worked. The average of the two check stubs is 28 hours per week, dropping the fraction (60+55 divided by four weeks) to obtain the weekly average.

Project hours for the next six months by using the week begin date and the week end date on the FSSP on the Activity screen. The FSSP will not allow entries greater than six months. Set the target date to allow collection of new verification in time to project the next six-month projection.

The specialist must monitor clients working 40 hours per week at or above state minimum wage who are not participating in the work participation program and deferred volunteers who may be working.

Change in hours of Work Activity

When a client reports a change in the number of hours of employment during the six-month projection, the specialist must gather actual check stubs that reflect the change. Change the actual hours previously recorded in the FSSP to the actual participation as verified. Use a minimum of two new consecutive pay stubs, wage statements or the collateral contact to project the new six-month period that begins the month after the month with the change.

Non-Paid Activities

Activities assigned to a DHS-served client on the FSSP must be verified using a DHS-630, Weekly Activity Log, when monitoring is required. Report weeks are always Sunday through Saturday. The activity log due date is always the Friday after the week end date. Use the Target Date on the FSSP Activity screen as your follow-up date for receipt of the activity log. Run the Target Date report available through the FSSP Main Menu and follow-up accordingly with clients who must return a DHS-630, Activity Log. You must enter actual hours of participation at least monthly for each client with assigned activities.

This client is advised of this requirement on the DHS-1538, Work and Self-Sufficiency Rules, at application.

If the client does not return the activity log by the due date, it is treated as a noncompliance. Send the DHS-2444, Notice of Noncompliance and schedule a triage appointment. If the client's form is not received by the time the triage appointment occurs, continue to treat as a noncom-

pliance. If the specialist receives the activity log before a DHS-2444 is sent, it is not noncompliance.

Validity of activity logs should be monitored and best practice is to check one entry for each client once per month.

Deferrals

See Verification Sources in this item for more information.

Verify the following reasons for deferral:

- **Temporary Incapacity.** Obtain medical evidence if the client claims a disabling condition expected to last 90 days or less. If needed, authorize a general medical exam or payment for a medical report; see BAM 815.
- **Disability.** If the client claims a disabling condition expected to last more than 90 days, it must be verified by one of the following:
 - Note from client's doctor.
 - DHS-49.
 - DHS-54A.
 - DHS-54E.
- **Problem Pregnancy.** If the client claims an inability to participate in the work participation program based on pregnancy complications, it must be verified by one of the following:
 - Note from client's doctor.
 - DHS-49.
 - DHS-54A.
 - DHS-54E.
- **Care of a Spouse/Child with Disabilities.** A doctor must verify all of the following in writing using a DHS-54A, Medical Needs or DHS-54E Medical Needs -Work Participation Program, form:
 - The disability of the spouse/child needing care and the extent and duration of the disability.
 - The spouse/parent is needed in the home to provide care.
 - The spouse/parent cannot engage in an employment-related activity due to the extent of care required.
- **Lack of Child Care.** Documentation that child care is not attainable from the Great Start Regional Child Care Resource Center serving their county.
- **Domestic Violence.** Verify if questionable.

Verify other deferral reasons as needed.

**VERIFICATION
SOURCES****Paid Work
Activities**

Verification of hours the client participates in a wage earning activity is required by the specialist when the client is not serviced by the work participation program. Use one of the following:

- Two consecutive pay statements that reflect hours worked.
- Collateral contact with the client's manager, supervisor, or authorized representative of the employer who is able to verify the hours worked.
- Semi-annual simplified reporting verification.
- TALX Work Number.

Non-Paid Activities

Use the DHS-630, Activity Log, to collect verification of non-paid activities as noted above.

**Age and School
Attendance**

See BEM 240, Age, and BEM 245, School Attendance and Student Status.

**SSI/RSDI Based on
Disability/
Blindness**

To verify information regarding SSI or RSDI based on disability or blindness, use one of the following:

- Document from the Social Security Administration.
- DHS-1552, Verification of Application or Appeal for SSI/RSDI.
- Third Party Single Online Query (SOLQ) ED-030.
- Consolidated Inquiry.

Lack of Child Care

Correspondence or telephone contact with the Great Start Connect agency confirming the client's inability to secure child care that meets the deferral criteria.

Domestic Violence

See Deferral for Domestic Violence in this item.

**Temporary
Incapacity**

Statement from an M.D./D.O. that the person is unable to work, including diagnosis, limitations on activities and expected duration.

The DHS-54A, Medical Needs, or the DHS 54E Medical Needs - Work Participation Program; DHS-49, Medical Examination Report; or other written statement is acceptable.

For SSI/RSDI application or denial due to duration, use one of the sources listed above for Care of a Spouse/Child with a Disability.

**EXHIBIT -
 STATEWIDE DHS
 TEEN PARENT
 SERVICE
 PROVIDERS LIST**

County	Agency	Phone Number	Administrator / Contact Person
Berrien	Catholic Family Services 1819 Gull Road Kalamazoo, MI 49048	(616)381-9800	Margaret O'Brien
Calhoun	Calhoun County Health Department 190 East Michigan Avenue Battle Creek, MI 49014	(616)969-6389	Shirley McKinney
Chippewa	Inter-Tribal Council of Michigan, Inc. 405 East Easterday Avenue Sault Ste. Marie, MI 49783	(906)632-6896 ext. 3036	
Clare	Central Michigan District Health Department 255 West Main Harrison, MI 48625	(989)539-6731	
Genesee	Mott Children's Health Center 806 Tuuri Place Flint, MI 48503	(810)767-5750	
Ingham	Ingham County Health Department Willow Plaza Services 306 West Willow Lansing, MI 48906	(517)484-9292 ext. 3544	Janice Kimble
Jackson	Florence Crittenton Services 1603 Lansing Ave. Jackson, MI 49202	(517)787-3500 ext. 27	Kim Brown
Kalamazoo	Kalamazoo County Human Services Department 3299 Gull Road Kalamazoo, MI 49001-1295	(616)373-5070	Arletha Jennings
Kent	Salvation Army Booth Services 1215 East Fulton Grand Rapids, MI 49503	(616)459-9468 Fax (616)459-5372	Tenisha Pulliam Ext. 278 Heather Brinkman Ext. 217
Lake	Healthy Beginnings Teen Parenting Services RR#3 PO Box 2259 Baldwin, MI 49304	(231)745-8424	Cherterine Foster
Montcalm	Catholic Social Services PO Box 480 Stanton, MI 48888	(989)831-8306	Vera Bogart Sally Beck

County	Agency	Phone Number	Administrator / Contact Person
Muskegon	Catholic Social Services 1095 Third Street, Suite 125 Muskegon, MI 49441-1976	(231)726-4735 ext. 236 Fax (231)722-0789	BAM Coehn Nan Andrews
Newaygo	Baldwin Family Health Care RR#3 PO Box 2259 Baldwin, MI 49304	(231)689-6447 ext. 407	Melody Potter
Oakland	Catholic Social Services 53 Franklin Blvd Pontiac, MI 48342	(248)334-3595 ext. 3235	
Ogemaw	AuSable Valley Community Mental Health 511 Griffin Street West Branch, MI 48661	(989)345-5571 ext. 282	Janet Jordan
Saginaw	Saginaw County Youth Protection Council 1630 Gratiot Street Saginaw, MI 48602	(989)792-6789 Fax (989)792-6137	Ron Spess Mary Ellen Johnson
Van Buren	Van Buren Department of Community Health 57418 County Road 681, Ste A Hartford, MI 49057	(269)621-3143	
Wayne	Lutheran Child and Family Services of Michigan 15160 W. Eight Mile Rd. Oak Park, MI 48237-3020	(248)968-0100 Fax (248)968-7163	Mary Kosal (ext. 252) Deidria Glosson (ext. 249)
	Alternatives for Girls 903 W. Grand Blvd. Detroit, MI 48208	((313)361-4000	Tavion Watts Amy Good
	Federation of Youth Services 548 E. Grand Blvd. Detroit, MI 48207	(313)267-4488	George Bascom
	Marillac Outreach Program St. Vincent & Sara Fisher Center 22255 Greenfield, Suite 330 Southfield, MI 48075	(313) 535-9200 Fax (248)559-2226	

LEGAL BASE

FIP

MCL 400.57
 Rehabilitation Act of 1973 (Section 504),
 Americans with Disabilities Act of 1990
 Michigan Persons with Disabilities Civil Rights Act 1976 PA 220, MCL
 37.1101-.1607

RAPC

45 CFR 400.82

**JOINT POLICY
DEVELOPMENT**

Medicaid, Adult Medical Program (AMP) also known as Adult Benefit Waiver (ABW), Transitional Medical Assistance (TMA/TMA-Plus), and Maternity Outpatient Medical Services (MOMS) policy has been developed jointly by the Department of Community Health (DCH) and the Department of Human Services (DHS).